DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN

License #: **3187-14-010**
Organization Name: **STARS**

Date of Inspection: **05-15-2024**
Program Type/Facility Name: **14-010 Orion House**

Standard(s) Cited	Comp	Description of Noncompliance	Actions to be Taken	Planned Comp. Date
12VAC35-46-70. - Each provider shall guarantee resident rights as outlined in § 37.2-400 of the Code of Virginia and in the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services (12VAC35-115).	N	Orion House This regulation was NOT MET as evidenced by: See OHR citations below.		4/27/2024

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12VAC35-115-110. C. (9a) - The provider's duties. 9. Providers shall comply with all applicable state and federal laws and regulations, certification and accreditation standards, and third party requirements as they relate to seclusion and restraint. 9a. Whenever an inconsistency exists between this chapter and federal laws or regulations, accreditation or certification standards, or the requirements of third party payers, the provider shall comply with the higher standard.	N	Orion House This regulation was NOT MET as evidenced by: During an internal investigation, the provider determined the following: • Individual 1 began swinging punches at Employee 1. • Employee 1 placed Individual 1 in a restraint that is not in compliance with the provider's internal standards.	PR) 05/22/2024 The staff was terminated on 4/27/24. OHR/OLR) Accepted 05/22/2024	4/27/2024

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12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	Orion House This regulation was NOT MET as evidenced by: "Abuse" means any act or failure to act by an employee or other person responsible for the care of an individual in a facility or program operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, that was performed or was failed to be performed knowingly, recklessly, or intentionally, and that caused or might have caused physical or psychological harm, injury, or death to a person receiving care or treatment for mental illness, intellectual disability, or substance abuse. Examples of abuse include acts such as: 3. Use of language that demeans, threatens, intimidates, or humiliates the person; 5. Use of excessive force when placing a person in physical or mechanical restraint; During an internal investigation the provider determined the following: • Individual 1 began swinging punches at Employee 1. • Employee 1 began using foul language directed at Individual 1 and placed Individual 1 in a restraint that is not in compliance with the provider's internal standards.	PR) 05/22/2024 Staff was terminated 4/27/24. OHR/OLR) Accepted 05/22/2024	4/27/2024

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General Comments / Recommendations:

I understand it is my right to request a conference with the reviewer and the reviewer's supervisor should I desire further discussion of these findings. By my signature on the Corrective Action Plan, I pledge that the actions to be taken will be completed as identified by the date indicated.

Cassie Purtlebaugh, Human Rights	(Signature of Organization Representative)	Date

C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined